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Bib Data Sheet

CONFIRMATION NO. 7465

<b>SERIAL NUMBER</b> 09/902,479	<b>FILING DATE</b> 07/09/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2161	<b>ATTORNEY DOCKET NO.</b> 006969-022311US
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**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A CIP OF 09/708,883 11/07/2000  
WHICH CLAIMS BENEFIT OF 60/216,779 07/07/2000  
AND CLAIMS BENEFIT OF 60/216,653 07/07/2000  
AND CLAIMS BENEFIT OF 60/206,207 05/22/2000  
AND CLAIMS BENEFIT OF 60/204,357 05/15/2000  
AND CLAIMS BENEFIT OF 60/181,299 02/09/2000  
AND CLAIMS BENEFIT OF 60/181,368 02/08/2000  
AND CLAIMS BENEFIT OF 60/165,885 11/16/1999  
AND CLAIMS BENEFIT OF 60/164,639 11/10/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 08/06/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY VA	SHEETS DRAWING 8	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**  
20350

**TITLE**  
Method and system for a user obtaining stamps over a communication network

<b>FILING FEE RECEIVED</b> 1170	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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